ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
|  |  |  |  |
| FEE DETERMINATION | Daniel |  | 07-24-01 |
| O.I.P.E. CLASSIFIER |  |  |  |
| FORMALITY REVIEW | MM | 572 | 10-02-01 |
| RESPONSE FORMALITY REVIEW |  |  |  |
|  |  |  |  |

## INDEX OF CLAIMS

| | | | | |
|---|---|---|---|---|
| ✔ | Rejected | N | | Non-elected |
| = | Allowed | I | | Interference |
| – | (Through numeral)... Canceled | A | | Appeal |
| ÷ | Restricted | O | | Objected |

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)